U.Q. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	(60)
	For Official Lise Only
	( AUG 152005 )
E	PAS DROP
-	

1. File Number U-669

3. Name and address of person filing.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

4. Name, file number, and address of labor organization.

Name	Chris	M Hooser	Name Teamsters Local 200	
			Labor Organization File Number 013-815	
P.O. B	ox, Bldg., Room No., if any	,	P.O. Box, Building and Room Number, if any	·
Street	9820 Veronica Dr		Street 6200 W. Bluemound Rd	
City	Oak Creek		City Milwaukee	
State	Wisconsin	ZIP Code + 4 53154	State Wisconsin	ZIP Code + 4 53213-4145
5. Positi	on in labor organization. B	usiness Agent		
Ente	er appropriate data below If,		ise or minor child directly or indirectly had any of sions set forth in the instructions):	the following interests
A. Held moneta	an interest in, engaged ir ry value from an employ	n transactions (including loans) with, or o er whose employees your organization	derived income or other economic benefit of on represents or is actively seeking to represent	sent.
6. Name	and address of Employer (ir	ncluding trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name				
Trade I	Name, if any:			
P.O. B	ox, Bldg., Room No., if any			
		,	7.b. Amount.	
Street				
City				
State		ZIP Code + 4		
		Signa	ature	
submi	tted in this report (including t	he undersigned declares, under penalty of f he information contained in any accompanyi ef, true, correct, and complete. (See the sec	Perjury and other applicable penalties of the law, to ng documents), has been examined by the signation on penalties in the instructions.)	that all of the information ory and is, to the best of the

On 8/12/200%

Date

414-479-3647

Telephone Number

Name of Person Filing Chris Hooser	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any).  Name PGU  Trade Name, if any:	9. Business deals with:  a. Labor Organization	
P.O. Box, Bldg., Room No., if any Suite 202  Street 1555 N. RiverCenter Dr  City Milwaukee  State Wisconsin ZIP Code +4 53212	b. Trust  C. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Matthew Robbins  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 202	11.a. Nature of such dealing.  Graduation gift for daughter	
Street 1555 N. RiverCenter Dr	11.b. Approximate dollar value of such dealing. \$50	
City Milwaukee  State Wisconsin ZIP Code + 4 53212	12.a. Nature of interest held or income received.	
	12.b. Amount.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above)	
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	er parts A and B above)	
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant	er parts A and B above) or other thing of value.	
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	er parts A and B above) or other thing of value.	
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Name of Person Filing Chris Hooser	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or included in a trust in which your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PGU	a Labor Organization	
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bldg., Room No., if any Suite 202	C. Employer	
Street 1555 N. RiverCenter Dr	hannisse of	
City Milwaukee		
State Wisconsin ZIP Code + 4 53212		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Jill M. Hartley	Graduation gift for daughter	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Suite 202		
Street 1555 N. RiverCenter Dr	11.b. Approximate dollar value of such dealing. \$50	
City Milwaukee	12.a. Nature of interest held or income received.	
State Wisconsin ZIP Code + 4 53212		
	12.b. Amount.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	er parts A and B above)	
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant	er parts A and B above)	
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Name of Person Filing Chris Hooser	2	File Number <b>U</b> -	
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business vely seeking to represent, or irectly to, or otherwise	S	
8. Name and address of Business (including trade name, if any).  Name PGU  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 202  Street 1555 N. RiverCenter Dr  City Milwaukee  State Wisconsin ZIP Code + 4 53212	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.	and the sale of th
Name Scott Soldon  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 202	Graduation gift fo	r daughter	
Street 1555 N. RiverCenter Dr	11.b. Approximate dollar valu	ie of such dealing	\$50
City Milwaukee	12.a. Nature of interest held	\$4.0 pmiles (face of prints) (1979)	man muma an managan mada an mada da
State Wisconsin ZIP Code + 4 53212			
	12.b. Amount.		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	1780 1 m · · · · · · · · · · · · · · · · · ·	
Name			4 Distriction of the Control of the
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Name of Person Filing Chris Hooser	File Number <b>U</b> -	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or inclealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
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Name PGU  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 202  Street 1555 N. RiverCenter Dr  City Milwaukee  State Wisconsin ZIP Code + 4 53212	a. Labor Organization b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Matthew Robbins  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	Beverages on 9/4/04	
Street 1555 N. RiverCenter Dr	11.b. Approximate dollar value of such dealing. \$30	
1000000000000000000000000000000000000	- Constant C	
City Milwaukee	12.a. Nature of interest held or income received.	
State Wisconsin ZIP Code + 4 53212	12.a. Nature of interest held or income received.	
	12.a. Nature of interest held or income received.  12.b. Amount.	
	12.b. Amount.	
State Wisconsin ZIP Code + 4 53212  C. Received from any employer (other than an employer covered under	12.b. Amount.	
State Wisconsin ZIP Code + 4 53212  C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.b. Amount.  In parts A and B above) or other thing of value.	
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## LM-30 DISCLAIMER

The transactions, dealings and interests that are reported in the attached Form LM-30 represent my good faith effort to reconstruct any reportable occurrences for calendar year 2004. Some items may have been unintentionally omitted. If, in the future, it comes to my attention that there is a matter which should have been reported for calendar year 2004, I will file an amended Form LM-30.

Signature

8-12-05

Date